

(November 1983)
(Formerly 9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N.M. DIST. CONS. COM. 3310W
P. O. BOX 1980
NEW MEXICO 88240

Budget Bureau No. 1004-
Expires August 31, 1985
5 LEASE DESIGNATION AND SERIAL
LC-032650 (b)
IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT" for such proposals.)

1 OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Texaco Producing Inc.	8. FARM OR LEASE NAME A. B. Coates C
3. ADDRESS OF OPERATOR P. O. Box 728, Hobbs, NM 88240	9. WELL NO. 11
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL & 1650' FWL Sec. 24	10. FIELD AND POOL OR WILDCAT Justis
14. PERMIT NO. 30-025-11733	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 24, T25S, R37E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3086' DF	12. COUNTY OR PARISH Lea
	13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(Other) Plug lower zone of dual completion. XX

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS, and give all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.*

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

1. Well Status - Justis Fusselman plugged. Set CIBP @ 6200' w/35' cmt. cap, 8-23-85. Justis Tubb Drinkard still producing.
2. Abandonment Date - 8-23-85
3. Reason for abandonment - Uneconomical production.
4. Future Plans - None.
5. Date of Future Workover or Plugging - n/a

18. I hereby certify that the foregoing is true and correct

SIGNED

W.B. Loh

TITLE Dist. Oper. Mgr.

DATE 01/20/86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

2.3.86

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.